

(REVISED 08/01/95)

LONG BEACH POLICE OFFICERS ASSOCIATION GRIEVANCE PROCEDURE FORM

(Chief of Police, Long Beach	Police Department)	
GRIEVANT:	POSITION:	
(Last Name, First N	Name M.I.)	
VIOLATION OF:		
	,	
TIME/PLACE OF OCCURREN	CE:	
SUGGESTED CORRECTION:		
STEPS TAKEN FOR INFORMA	AL RESOLUTION:	
(Person /P.O.A Represent-	(Signature of Grievant)	(Date Submitted to

ACTION TAKEN UNDER STEP 1 - INFORMAL PROCEDURE (To Be Completed by the Deputy Chief of Police) (Signature of Deputy Chief of Police) (Date) SATISFIED: __ (Grievant's Signature) (Grievant's Signature) NOT SATISFIED: SUBMITTED TO STEP II: ACTION TAKEN UNDER STEP II (To Be Completed by the Department Head) I have reviewed the grievance and AFFIRM _____ REVERSE ____ MODIFY ____ the disposition made at the First Step. (Signature of Chief of Police) (Date) NOT SATISFIED: (Grievant's Signature) SATISFIED: (Grievant's Signature) SUBMITTED TO STEP III: _____(Date) ACTION TAKEN UNDER STEP III - EMPLOYEE RELATIONS OFFICER HEARING Decision of Hearing Officer rendered on See Attached. NOT SATISFIED: (Grievant's Signature) SATISFIED: _ (Grievant's Signature) SUBMITTED TO STEP IV:

ACTION TAKEN UNDER STEP IV - ARBITRATION OR CITY MANAGER HEARING

(Date)